FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2008

Estimated average burden 16.00



PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

RECD S.E.O.

UNIFORM LIMITED OFFERING EXEMPTION Name of Offering check if this is an amendment and name has changed, and indicate change.) Sale and Issuance of Series B Preferred Stock (and Common Stock issuable upon conversion thereof) Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment

2006

A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) TrueDemand Software, Inc.

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 485 Alberto Way, Suite 200, Los Gatos, CA 95032 (408) 399-1924 Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, Telephone Number (Including Area Code)

Brief Description of Business Developer of supply chain management software Type of Business Organization corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: 0 3 0 4 X Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;

CN for Canada, FN for other foreign jurisdiction)

E D

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File - U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been, made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION .

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; Each general and managing partner of partnership issuers. Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Peters, Eric Business or Residence Address (Number and Street, City, State, Zip Code) 485 Alberto Way, Suite 200, Los Gatos, CA 95032 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Blanchard, Jr., Raymond J. Business or Residence Address (Number and Street, City, State, Zip Code) 485 Alberto Way, Suite 200, Los Gatos, CA 95032 Promoter Director Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Vasan, Robin Business or Residence Address (Number and Street, City, State, Zip Code) 2800 Sand Hill Road, Suite 250, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Williams, Bob Business or Residence Address (Number and Street, City, State, Zip Code) 10600 North De Anza Boulevard, Suite 100, Cupertino, CA 95014 Beneficial Owner Director Check Box(es) that Apply: Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Funds affiliated with Mayfield Fund Business or Residence Address (Number and Street, City, State, Zip Code) 2800 Sand Hill Road, Suite 250, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Funds affiliated with Bay Partners Business or Residence Address (Number and Street, City, State, Zip Code) 10600 North De Anza Boulevard, Suite 100, Cupertino, CA 95014 Director General and/or Promoter Beneficial Owner **Executive Officer** Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Weng, Jie

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General and/or

Managing Partner

Beneficial Owner

Executive Officer

□ Director

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

3000 Sand Hill Road, Building One, Suite 170, Menlo Park, CA 94025

Promoter

485 Alberto Way, Suite 200, Los Gatos, CA 95032

Check Box(es) that Apply:

Watson, James

Full Name (Last name first, if individual)

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Funds affiliated with Cl			_		
Business or Residence Address 3000 Sand Hill Road, B			A 94025		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		and the second		B. IN	FORMAT	ION ABOU	JT OFFER	ING				
1. Has the is	suer sold, o	or does the is				ted investors mn 2, if filir		-			Yes	No
2. What is the minimum investment that will be accepted from any individual?									\$ None			
3. Does the offering permit joint ownership of a single unit?									Yes	No		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
Business or R	tesidence Ad	dress (Numbe	er and Street,	City, State, 2	Zip Code)		,					
Name of As	sociated Br	oker or Dea	ler									
States in Wh (Che			Solicited or k individual									All States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name (L	ast name firs	t, if individua	al)			_						_
Business or R	lesidence Ad	dress (Numb	er and Street,	City, State, 2	Zip Code)							
Name of As					· · · · · · · · · · · · · · · · · · ·							
				. 1	C - 1: -: 4 D	-1						
States in WI (Che			k individual			cnasers					🗆 A	All States
IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name (L	ast name firs	st, if individu	al)									
Business or R	Residence Ad	dress (Numb	er and Street,	City, State, 2	Zip Code)							
Name of As	sociated Br	oker or Dea	ıler									
States in Wi			Solicited or k individual		Solicit Pure	chasers						All States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		Aggregate ffering Price	A	mount Already Sold
Debt	\$		\$	
Equity			\$	8,000,000.28
Common Preferred				
Convertible Securities (including warrants)	\$ <u></u>		\$_	
Partnership Interests	\$		\$	
Other (Specify)	\$		\$	
Total	\$ \$	8,151,529.82	\$	8,000,000.28
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or " zero."		Number	D	Aggregate
		Investors	Φ.	Purchases
Accredited Investors			\$_	8,000,000.28
Non-accredited Investors			\$	
Total (for filings under Rule 504 only)			_\$_	
Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		Type of Security	1	Dollar Amount Sold
Type of offering				
Rule 505			\$_	
Regulation A			\$_	
Rule 504			\$_	
Total			\$	
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
		_	\$	
Transfer Agent's Fees				
•		_	\$	
Transfer Agent's Fees Printing and Engraving Costs Legal Fees			\$_ \$_	12,000.00
Printing and Engraving Costs			\$_ \$_ \$_ \$_	12,000.00
Printing and Engraving Costs Legal Fees				12,000.00
Printing and Engraving Costs Legal Fees Accounting Fees			\$_	12,000.00
Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees			\$_	12,000.00

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				THE TOTAL STREET
an	Enter the difference between the aggregate offerind total expenses furnished in response to Part C—oceeds to the issuer."	Question 4.a. This difference is the "adjusted	d gross	8,139,229.8
us ch	dicate below the amount of the adjusted gross product of the purposes shown. If the amount follows the box to the left of the estimate. The total of occeds to the issuer set forth in response to Part C - 6	or any purpose is not known, furnish an estimation of the payments listed must equal the adjusted	ate and	
			Payments Officers Directors, Affiliate	, & Payments To
	Salaries and fees		\$	\$
	Purchase of real estate		\$	\$
	Purchase, rental or leasing and installation of mad	chinery and equipment	\$	🗆 \$
	Construction or leasing of plant buildings and fac	cilities	\$	\$
	Acquisition of other businesses (including the val offering that may be used in exchange for the assissuer pursuant to a merger)	ets or securities of another	\$	□ \$
	Repayment of indebtedness		\$	s
	Working capital		\$	\$ 8,139,229.8
	Other (specify):		\$	\$
	Column Totals		\$\$ \$	\$\\\ \\$ \\ \\
		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by ature constitutes an undertaking by the issuer to fur- rmation furnished by the issuer to any non-accredited	rnish to the U.S. Securities and Exchange C	ommission, upor	
	er (Print or Type) eDemand Software, Inc.	Signature		Date August 6 , 2006
	ne of Signer (Print or Type) Peters	Title of Signer (Print or Type) Chief Executive Officer		

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE Yes No 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? See Appendix, Column 5, for state response. 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form

- D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) TrueDemand Software, Inc.	Signature	1	1-	Date August 16, 2006
Name (Print or Type)	Title (Print	or Ty	pe)	
Eric Peters	Chief Exec	utiv	e Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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APPENDIX

1	2	2	3			4	<u></u>		5
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA			Series B Preferred Stock \$8,000,000.28	8	\$8,000,000.28				X
СО									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA					1				
MI									
MN					†				
MS									

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APPENDIX

1	2	2	3		5						
	Intend to non-ac investors (Part B-	ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MO	103	110		Investors	Amount	Investors	Amount	103	1,10		
MT											
NE											
NV											
NH											
NJ							· · ·				
NM											
NY											
NC											
ND					1						
ОН											
ОК											
OR											
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